



BUSINESS LICENSE COMMISSION
COUNTY OF LOS ANGELES
374 KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TEMPLE STREET
LOS ANGELES, CA 90012
(213) 974-7691



August 5, 2011

David Bon-Chee Chang
Pure Wellness Center
23310 Cinema Dr. #104
Valencia, CA 91355

MEMBERS
STEVEN AFRIAT
PRESIDENT
RENÉE CAMPBELL
VICE-PRESIDENT
SARA VASQUEZ
SECRETARY
JAMES BARGER
COMMISSIONER
SHAN LEE
COMMISSIONER

HEARING ON MASSAGE PARLOR-GENERAL/SC
BUSINESS LICENSE ID #138409

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday, August 24, 2011 at 9:00 a.m.** in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS

You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost. In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either **a professional/certified interpreter or other person who is fluent in both English and your native language.** If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost in Lot 14, the Music Center lot, located at the corner of Grand Avenue and Temple Street. A map is enclosed. **Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.**

Sincerely,

STEVEN AFRIAT
President

Lupe Duron
Commission Staff

NOTICE TO PRINTER
STATE LAW REQUIRES THAT THIS
LEGAL ADVERTISEMENT SHALL BE SET
IN TYPE NOT SMALLER THAN NONPAREIL (6 PT.)

CUSTOMER CODE : Z 91085

NEWSPAPER :NEWHALL SIGNAL

PUBLISH 3 TIMES

1ST PUBLISHING DATE:.....07/07/2011
2ND PUBLISHING DATE:.....07/14/2011
3RD PUBLISHING DATE:.....07/21/2011

REPRINTS ORDERED: NONE

NOTICE ON HEARING TO CONDUCT

MASSAGE PARLOR-GENERAL/SC

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN
MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE
COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:.....23310 CINEMA DR #104
VALENCIA, CA 91355
NAME OF APPLICANT:.....PURE WELLNESS CENTER / DAVID BON-
CHEE CHANG
PURE WELLNESS CENTER
DATE OF HEARING:.....08/24/2011
TIME OF HEARING:.....09:00A.M.

**“ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF
THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS
LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING OF THE HEARING AND BE HEARD
RELATIVE THERETO”**

OFFICE OF THE COMMISSION:

**OFFICE OF THE COMMISSION
500 W. TEMPLE STREET RM. 374
LOS ANGELES, CA 90012**

RETURN TO:

**LOS ANGELES COUNTY TAX COLLECTOR
BUSINESS LICENSE SECTION
225 N. HILL STREET RM. 109
LOS ANGELES, CA 90012**



**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL
SUMMARY SHEET**

KIND OF BUSINESS: **MASSAGE PARLOR-GENERAL /SC**

ADDRESS OF BUSINESS: **23310 CINEMA DR 104, VALENCIA, CA 91355**

TELEPHONE: **(661) 839-3283**

OWNER OF BUSINESS: **DAVID BON-CHEE CHANG**

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **PURE WELLNESS CENTER**

MAILING ADDRESS: **23310 CINEMA DR 104, VALENCIA, CA 91355**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input type="checkbox"/> 2. Risk Management			
<input checked="" type="checkbox"/> 3. Building & Safety	YES	07/06/11	
<input checked="" type="checkbox"/> 4. Fire Department	YES	05/19/11	
<input checked="" type="checkbox"/> 5. Public Health	YES	06/28/11	
<input type="checkbox"/> 6. Treasurer & Tax Collector			
<input checked="" type="checkbox"/> 7. Business License Commission			
<input checked="" type="checkbox"/> 8. Sheriff Department	YES	05/26/11	
<input checked="" type="checkbox"/> 9. Regional Planning Commission	YES	06/17/11	
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing			
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff Fingerprint	YES	05/26/11	

Conditions:



s Angeles County Treasurer and Tax Collector
Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ 2021.00

ID # 138409

BUSINESS INFORMATION

Type of Business: <u>8430 Massage Parlor General</u>	Address of Business: <u>23310 Cinema Dr #104, Valencia, CA 91355</u>	
	Business Telephone: <u>(661) 839-3283 (temp)</u>	
DBA (Business Name): <u>PURE WELLNESS CENTER</u>	Mailing Address: <u>23310 Cinema Dr #104 Valencia, CA 91355</u>	
Sellers Permit # (State Board of Equalization):		
Business Ownership Structure: Single Owner <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> If LLC or Corporation, the information below is required:		
Date of Incorporation: <u>5/11/07</u>	Incorporated in the State of: <u>CA</u>	
Exact Corporate Name: <u>DAVID CHANG CHIROPRACTIC INC</u>		
Names of Officers	Addresses	Titles
<u>David Chang</u>	<u>23310 Cinema Dr #104, Valencia CA 91355</u>	<u>President</u>

APPLICANT INFORMATION

Applicant's Full Name: <u>David Boncher Chang</u>		
Home Address: <u>41629 Oak Barrel Ct. Palmdale CA 93551</u>		
Home Telephone:	Cell Phone:	Email address: <u></u>
Social Security #:	Date of Birth:	Place of Birth:
Driver's License or State ID#:		Expiration Date:
Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Height <u>6'0"</u>	Weight <u>240lb</u> Hair Color <u>blk</u> Eye Color <u>brn</u>

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the license applied for, I agree to submit any additional information that may be required, to conduct all phases of this business license in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances and regulations.

Date: 4/19/11 Applicant's Signature: [Signature]
Application taken by: ME Date: 4-19-11

ID #
138409

State of California

Secretary of State



I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of 2 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

MAY 11 2007

A handwritten signature in cursive script that reads "Debra Bowen".

DEBRA BOWEN
Secretary of State

2988561

ID 138409

ENDORSED - FILED
In the office of the Secretary of State
of the State of California

MAY 11 2007

**ARTICLES OF INCORPORATION
OF
DAVID CHANG CHIROPRACTIC, INC.**

I

The name of this corporation is; **David Chang Chiropractic, Inc.**

II

The purpose of the corporation is to engage in the Profession of **Chiropractic** and any other lawful activities (other than the banking or trust company business) not prohibited to a corporation engaging in such profession by applicable laws and regulations.

III

This corporation is a professional corporation within the meaning of Part 4, Division 3, Title 1, California Corporations Code.

IV

The name and address in the State of California of this corporation's initial agent for service of process is;

**DAVID CHANG
42055 50TH ST WEST, STE 9
QUARTZ HILL, CA 93536**

V

This corporation is authorized to issue only one class of shares of stock which shall be designated "common stock", and the total number of shares which this corporation is authorized to issue is 10,000.

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

NRSC

KIND OF BUSINESS: MASSAGE PARLOR-GENERAL /SC

ADDRESS OF BUSINESS: 23310 CINEMA DR 104, VALENCIA, CA 91355

TELEPHONE: (661) 839-3283

OWNER OF BUSINESS: DAVID BON-CHEE CHANG

CAL DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PURE WELLNESS CENTER

MAILING ADDRESS: 23310 CINEMA DR 104, VALENCIA, CA 91355

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

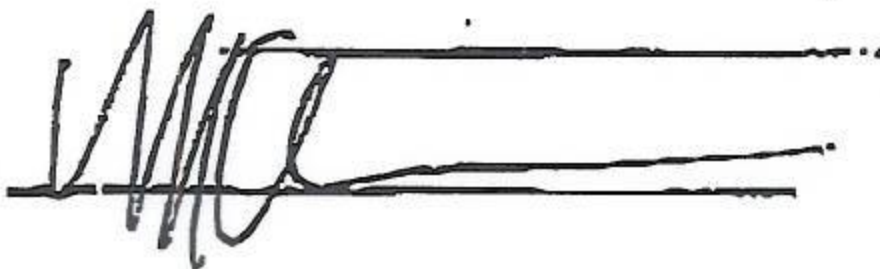
**FIRE DEPARTMENT
LA COUNTY**

☒ APPROVAL

☐ DENIAL

RECOMMENDATION:

SIGNATURE:



DATE:

5/11/11

BASIC LICENSE NO. 8630

DATE 04/20/11

IDENTIFICATION NUMBER 138409

911-00570
COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE
APPLICATION REFERRAL

✓ Vernon CA

KIND OF BUSINESS: MASSAGE PARLOR-GENERAL /SC

ADDRESS OF BUSINESS: 23310 CINEMA DR 104, VALENCIA, CA 91355

TELEPHONE: (661) 839-3283

OWNER OF BUSINESS: DAVID BON-CHEE CHANG

CAL. DR. LIC.#:

aka
Chee, David

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PURE WELLNESS CENTER

MAILING ADDRESS: ~~23310 CINEMA DR 104, VALENCIA, CA 91355~~

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

SHERIFF FINGERPRINT
LA COUNTY☒ APPROVAL☐ DENIAL

RECOMMENDATION:

Approved

SIGNATURE:

UP 526470

DATE:

5/23/11

BASIC LICENSE NO. 8430

DATE 04/20/11

IDENTIFICATION NUMBER 138409

4/28

RB

ZONING REFERRAL

I.D. #:

138409

JUN 15 2011

TO: CITY OF SANTA CLARITA
COMMUNITY DEVELOPMENT/PLANNING
23920 VALENCIA BLVD., STE # 140
SANTA CLARITA, CA 91355

FROM: TREASURER TAX COLLECTOR
BUSINESS LICENSE SECTION
23757 VALENCIA BLVD
SANTA CLARITA CA 91355
FAX # (661) 945-3512

PLANNING APPROVAL AS MARKED
SUBJECT TO ALL APPLICABLE SECTIONS
OF THE UNIFIED DEVELOPMENT CODE
CITY OF SANTA CLARITA
COMMUNITY DEVELOPMENT


PLANNING DIVISION

DATE: 4-19-11

TYPE OF BUSINESS(ES)

Massage Parlor - General

ADDRESS OF BUSINESS

23310 Cinema Dr # 104

CITY

Valencia ca

ZIP CODE

91355

NAME OF OWNER

David Chang Chiropractic Inc

"DBA"

Pure Wellness Center

TEL #:

(661) 839-3283

MAILING ADDRESS

S.A.A.

EXISTING USE

YES ()

NO ()


USE PERMITTED IN ZONE

"APPROVED"

USE NOT PERMITTED IN ZONE

"DENIED"

REMARKS

SITE INSPECTION 6/13/11 NO VIOLATIONS OF
CITY ORDINANCE - MASSAGE PARLORS.  6/13/11

SIGNATURE OF ZONING OFFICER

6/15/11

DATE

Jun. 27. 2011 8:03AM

anta Clarita FIB

PHL LACOUNT.

No. 4682

P. 1

06/06

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**70
5/4/11

KIND OF BUSINESS: MASSAGE PARLOR-GENERAL /SC

ADDRESS OF BUSINESS: 23310 CINEMA DR 104, VALENCIA, CA 91355

TELEPHONE: (661) 839-3283

(661) 255-2516 (office)

OWNER OF BUSINESS: DAVID BON-CHEE CHANG

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PURE WELLNESS CENTER

MAILING ADDRESS: 23310 CINEMA DR 104, VALENCIA, CA 91355

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

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**PUBLIC HEALTH
LA COUNTY**

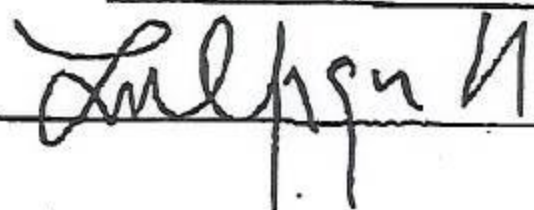
APPROVAL



DENIAL

RECOMMENDATION:

SIGNATURE:



DATE:

6/20/11

BASIC LICENSE NO. 8430

DATE 04/20/11

IDENTIFICATION NUMBER 138409

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: MASSAGE PARLOR-GENERAL /SC

ADDRESS OF BUSINESS: 23310 CINEMA DR 104, VALENCIA, CA 91355

TELEPHONE: (661) 839-3283

OWNER OF BUSINESS: DAVID BON-CHEE CHANG

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PURE WELLNESS CENTER

MAILING ADDRESS: 23310 CINEMA DR 104, VALENCIA, CA 91355

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**BUILDING & SAFETY
SANTA CLARITA**☒ APPROVAL☐ DENIALRECOMMENDATION: _____

_____SIGNATURE: *David Bon-Chee Chang*DATE: 7/6/11

BASIC LICENSE NO. 8430

DATE 07/06/11

IDENTIFICATION NUMBER 138409